ARIZONA CORPORATION COMMISSION

UTILITIES DIVISION



Director of Utilities

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

C

WS-02672A CLOUD NINE WATER COMPANY INC.-SEWER DIVISION 90 RAINBOW WAY SIERRA VISTA AZ 85635-

ANNUAL REPORT

FOR YEAR ENDING

12 31 2001

FOR COMMISSION USE

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SCANNED

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PROCESSED BY: 4-19-02 Cm

COMPANY INFORMATION

Company Name (Business Name)	Cloud Nine Water Compan	y, Inc. (Sewer)
Mailing Address 90 Rainbow (Street)	Way	
Sierra Vista	AZ	85635
(City)	(State)	(Zip)
520-458-5854	520-458-4532	N/A
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address N/A		
Local Office Mailing Address	90 Rainbow Way	
Sierra Vista	(Street) AZ	85635
(City)	(State)	(Zip)
520-458-5854	520-458-4532	N/A
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email AddressN/A		

MANAGEMENT INFORMATION

Management Contact:	Nick Novasic	P	resident
-	(Name)	(Ti	tle)
90 Rainbow Way	Sierra Vista	AZ	85635
(Street)	(City)	(State)	(Zip)
520-458-5854	520-458-4532	N	/A
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code	
Email Address			
On Site Manager:	Nick Novasic (Name)		
90 Rainbow Way	Sierra Vista	AZ	85635
(Street)	(City)	(State)	(Zip)
520-458-5854	520-458-4532	N	/A
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Inc.	lude Area Code)

Statutory Agent:	Eugene C. Gieseler		
	(Name)		
3040 E. Sunrise Dr., Ste. 200 (Street)	Tucson (City)	AZ (State)	85718 (7in)
·		(State)	(Zip)
Telephone No. (Include Area Code)	520-792-2859 Fax No. (Include Area Code	Pager/Cell No.	(Include Area Code)
		* WD**** C === - C = =	(Morado / Maa cout)
Attorney:	Eugene C. Gieseler (Name)		
2010 - 2 1 2 2	•	A.67	05710
3040 E. Sunrise Dr., Ste. 200 (Street)	Tucson (City)	AZ (State)	85718 (Zip)
520-792-1181	520-792-2859	()	(
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
OWN	NERSHIP INFORMATION	<u> </u>	
Check the following box that applies to yo	our company:		landed to the second of the se
Sole Proprietor (S)	C Corporation (C)	(Other than As	sociation/Co-op)
Partnership (P)	X Subchapter S Corp	oration (Z)	
☐ Bankruptcy (B)	Association/Co op ((A)	
Receivership (R)	Limited Liability C	ompany	
Other (Describe)			
	COUNTIES SERVED		
Check the box below for the county/ies in	which you are certificated to prov	ride service:	
□ АРАСНЕ	X COCHISE	□ coc	ONINO
☐ GILA	☐ GRAHAM	GRE	ENLEE
☐ LA PAZ	☐ MARICOPA	□ мон	IAVE
☐ NAVAJO	☐ PIMA	☐ PINA	L
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUM	A
☐ STATEWIDE			

UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	
No.	DECRIPTION	Cost	Depreciation	O.C.L.D.
		(OC)	(AD)	(OC less AD)
351	Organization			
352	Franchises			
353	Land and Land Rights			
354	Structures and Improvements			
355	Power Generation Equipment			
360	Collection Sewers – Force			
361	Collection Sewers – Gravity			
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations			
370	Receiving Wells			
380	Treatment and Disposal Equip.			
381	Plant Sewers			· · · · · · · · · · · · · · · · · · ·
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment	.		
390	Office Furniture and Equipment			
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.			
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			Address of the state of the sta
	TOTALS	0	0	0

This amount goes on the Balance Sheet Acct. No. 108 -

CALCULATION OF DEPRECIATION EXPENSE

Acct.		Original	Depreciation	Depreciation
No.	DESCRIPTION	Cost (1)	Percentage (2)	Expense (1x2)
351	Organization			
352	Franchises			
353	Land and Land Rights			
354	Structures and Improvements			
355	Power Generation Equipment			
360	Collection Sewers – Force			
361	Collection Sewers – Gravity			
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations			
370	Receiving Wells			
380	Treatment and Disposal Equip.			
381	Plant Sewers			
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment			
390	Office Furniture and Equipment			
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.			
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			
	TOTALS	0	0	0

This amount goes on Comparative Statement of Income and Expense Acct. 403

BALANCE SHEET

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	ASSETS	TEST YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$	\$
132	Special Deposits		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS		
		\$	\$
	FIXED ASSETS		
101	Utility Plant in Service	\$	\$
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$	\$
10 00 to to to 10 00 00	TOTAL ASSETS	\$ 0	\$ 0

NOTE: Total Assets on this page should equal Total Liabilities and Capital on the following page.

BALANCE SHEET (CONTINUED)

Acct. No.	LIABILITIES	BALANCE AT BEGINNING OF TEST YEAR	BALANCE AT END OF YEAR
	En abilities		
	CURRENT LIABILITES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		773
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$	\$
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
	DEFERRED CREDITS		
252	Advances in Aid of Construction	\$	\$
253	Other Deferred Credits		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$	\$
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	¢.
211	Other Paid in Capital	J)	\$
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
21 0	TOTAL CAPITAL	\$	\$
	TOTAL OATTIAL	Ψ	Ф
	TOTAL LIABILITIES AND CAPITAL	\$ 0	s 0

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

	OPERATING REVENUES	PRIOR YEAR	TEST YEAR
521	Flat Rate Revenues	\$	\$
522	Measured Revenues		
536	Other Wastewater Revenues		
	TOTAL REVENUES	\$ 12,704.38	\$ 8,576.29
	OPERATING EXPENSES		
701	Salaries and Wages	\$ 10,764.00	\$ 10,764.00
710	Purchased Wastewater Treatment		
711	Sludge Removal Expense		
715	Purchased Power		, , , , , , , , , , , , , , , , , , ,
716	Fuel for Power Production		
718	Chemicals		
720	Materials and Supplies		
731	Contractual Services – Professional		
735	Contractual Services – Testing		
736	Contractual Services – Other		
740	Rents		
750	Transportation Expense		
755	Insurance Expense		
765	Regulatory Commission Expense		
775	Miscellaneous Expense		
403	Depreciation Expense		
408	Taxes Other Than Income		
408.11	Property Taxes		
409	Income Taxes		
	TOTAL OPERATING EXPENSES	\$ 10,764.00	\$ 10,764.00
	OTHER INCOME/EXPENSE		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	TOTAL OTHER INCOME/EXP	\$ 0	\$ 0
	NET INCOME/(LOSS)	\$ 1,940.38	\$ (2,187.71)

SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued	N/A			
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	0,	1 /0	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

WASTEWATER COMPANY PLANT DESCRIPTION

TREATMENT FACILITY

TYPE OF TREATMENT		
(Extended Aeration, Step Aeration, Oxidation		
Ditch, Aerobic Lagoon, Anaerobic Lagoon,	N/A	
Trickling Filter, Septic Tank, Wetland, Etc.)	N/A	
DESIGN CAPACITY OF PLANT		
(Gallons Per Day)	N/A	

LIFT STATION FACILITIES

Location	Quantity of Pumps	Horsepower Per Pump	Capacity Per Pump (GPM)	Wet Well Capacity (gals)
N/A				

FORCE MAINS

Size	Material	Length (Feet
4-inch	N/A	
6-inch	N/A	

MANHOLES

Quantity
N/A
N/A

CLEANOUTS

Quantity		
	N/A	
		-

WASTEWATER COMPANY PLANT DESCRIPTION CONTINUED

COLLECTION MAINS

SERVICES

Size (in inches)	Material	Length (in feet)
4	N/A	
6	N/A	
8	N/A	
10	N/A	
12	N/A	
15	N/A	
18	N/A	
21	N/A	
24	N/A	
30	N/A	

Size (in inches)	Material	Quantity
4	N/A	
6	N/A	
8	N/A	
12	N/A	
15	N/A	

FOR THE FOLLOWING FIVE ITEMS, LIST THE UTILITY OWNED ASSETS IN EACH CATEGORY

SOLIDS PROCESSING AND HANDLING FACILITIES	N/A	
DISINFECTION EQUIPMENT (Chlorinator, Ultra-Violet, Etc.)	/N/A	
FILTRATION EQUIPMENT (Rapid Sand, Slow Sand, Activated Carbon, Etc.)	N/A	
STRUCTURES (Buildings, Fences, Etc.)	N/A	
OTHER (Laboratory Equipment, Tools, Vehicles, Standby Power Generators, Etc.	N/A	

WASTEWATER FLOWS

MONTH/YEAR (Most Recent 12 Months)	NUMBER OF SERVICES	TOTAL MONTHLY SEWAGE FLOW	SEWAGE FLOW ON PEAK DAY
N/A			

PROVIDE THE FOLLOWING INFORMATION AS APPLICABLE

Method Of Effluent Disposal	
(leach field, surface water discharge, reuse, injection wells, groundwater recharge, evaporation ponds, etc.)	N/A
Wastewater Inventory Number (all wastewater systems are assigned an inventory number)	N/A
Groundwater Permit Number	N/A
ADEQ Aquifer Protection Permit Number	N/A
ADEQ Reuse Permit Number	N/A
EPA NPDES Permit Number	N/A

STATISTICAL INFORMATION

Total number of customers	250	
Total number of gallons treated	N/A	gallons

COMPANY NAME Cloud Nine Water Company, Inc. (Sewer)	YEAR ENDING 12/31/200
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INC	COME TAXES	
For this reporting period, provide the following	; :	
Federal Taxable Income Reported	N/A	
Estimated or Actual Federal Tax Liability	N/A	
State Taxable Income Reported	N/A	
Estimated or Actual State Tax Liability	N/A	
Amount of Grossed-Up Contributions/Advance	es:	
Amount of Contributions/Advances	N/A	
Amount of Gross-Up Tax Collected	N/A	
Total Grossed-Up Contributions/Advances	N/A	
the amount of refund due to each Payer, and th to the Payer. CERTIFICATION	e date the Utility expects to make	or has made the refund
The undersigned hereby certifies that the Utility in the prior year's annual report. This certific Officer, if a corporation; the managing generalimited liability company or the sole proprietor,	cation is to be signed by the Presidal partner, if a partnership; the	dent or Chief Executive
SIGNATURE LA VASIC	April 15, 2002 DATÉ	_
Nick Novasic	President	
PRINTED NAME	TITLE	_

COMPANY NAME Cloud Nine Water Company, Inc. (Sewer) YEAR ENDING 12/31/2001				
PROPERTY TAXES				
Amount of actual property taxes paid during Calendar Year 2001 was: \$0				
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.				
If no property taxes paid, explain why				
Collect sewer fees and remit to City of Sierra Vista only.				
15				

VERIFICATION AND **SWORN STATEMENT Intrastate Revenues Only**

AHIZONA CUHMIPANION COMMISSIL 1	
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APR 1 7 2002	
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VERIFICATION

OF THE

STATE OF	Arizona

I, THE UNDERSIGNED

Cochise NAME (OWNER OR OFFICIAL) TITLE

COUNTY OF (COUNTY NAME)

Nick Novasic, President COMPANY NAME

Cloud Nine Water Company, Inc.

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA COPRORATION COMMISSION

FOR THE YEAR ENDING

MONTH YEAR DAY 12 31 2001

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE **UTILITY OPERATIONS DURING CALENDAR YEAR 2001 WAS:**

> Arizona IntraState Gross Operating Revenues Only (\$) 8,576.29

(THE AMOUNT IN BOX ABOVE **INCLUDES \$** IN SALES TAXES BILLED, OR COLLECTED

**REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

520-458-5854

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

NOTARY PUBLIC TATE OF ARIZONA COUNTY OF COCHISE

MY COMM. EXPIRES NOVEMBER 19, 2004

DAY OF

COUNTY NAME Cochise 2002

CHILLIAS EMPLOYMENT MY COMMISSION EXPIRES

URSULA C. GUTTRY

SIGNATURE OF NOTARY PUBLIC

VERIFICATION **AND SWORN STATEMENT** RESIDENTIAL REVENUE



Director of Unities

VERIFICATION

INTRASTATE REVENUES ONLY

STATE OF ARIZONA	(COUNTY NAME) Cochise	
I, THE UNDERSIGNED	NAME (OWNER OR OFFICIAL) Nick Novasic	TITLE President
OF THE	Cloud Nine Water Company, Inc.	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR 2001 12 31

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2001 WAS:

(THE AMOUNT IN BOX AT LEFT
INCLUDES \$ 0
IN SALES TAXES BILLED, OR COLLECTED

DAY OF

*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

SIGNATURE OF OWNER OR OFFICIAL

SUBSCRIBED AND SWORN TO BEFORE ME A NOTARY PUBLIC IN AND FOR THE COUNTY OF

-#Cr

NOTARY PUBLIC NAME COUNTY NAME Cochise 20 OL

OFFICIAL SEAL NOTARY PUBLIC SEALTE OF ARIZONA

THIS

EXPIRES Nov. 19,04 x level